

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 10/26/2022	
NAME OF PROVIDER OR SUPPLIER: NEMOURS CHILDREN'S HOSPITAL, SURGERY CENTER, BRYN MAWR			STREET ADDRESS, CITY, STATE, ZIP CODE: 825 OLD LANCASTER ROAD, SUITE 250 BRYN MAWR, PA 19010		
STATE LICENSE NUMBER: 23801501					
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE	(X5) COMPLETE DATE	
S 0000	<p>INITIAL COMMENT</p> <p>This report is the result of a Special Monitor survey conducted onsite on October 26, 2022, for the closure of the Nemours Children's Hospital, Surgery Center, Bryn Mawr. The facility voluntarily closed the facility and surrendered their license. Based on the Closure survey, it was determined the facility was in compliance with all applicable Closure requirements of the Pennsylvania Department of Health's Rules and Regulations for Ambulatory Care Facilities, Annex A, Title 28, Part IV, Subparts A and F, Chapters 551-573, November 1999 and the current edition of the Guidelines for Design and Construction of Hospital and Health Care Facilities.</p>	S 0000			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE:

(X6) DATE:



Certified End Page

NEMOURS CHILDREN'S HOSPITAL, SURGERY CENTER, BRYN MAWR

STATE LICENSE NUMBER: 23801501

SURVEY EXIT DATE: 10/26/2022

**I Certify This Document to be a True and Correct Statement of Deficiencies and
Approved Facility Plan of Correction for the Above-Identified Facility Survey**

A handwritten signature in black ink that reads "Jeane Parisi".

Jeane Parisi
Deputy Secretary for Quality Assurance

A handwritten signature in black ink that reads "Debra L. Bogen MD".

Debra L. Bogen, MD, FAAP
Acting Secretary of Health



THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY